Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 1 of 25

B 6 Summary (Official Form 6 - Summary) (12/14)

UNITED STATES BANKRUPTCY COURT

Eastern District of Virginia

inre ANA H. IRAZABAL,	Case No. 15-13212
Debtor	Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property			\$ 500,000		
B - Personal Property			\$ 16,700		
C - Property Claimed as Exempt			Ф		
D - Creditors Holding Secured Claims				\$ 492,939.54	<u></u>
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)				s ϕ	275
F - Creditors Holding Unsecured Nonpriority Claims				s	16.3
G - Executory Contracts and Unexpired Leases				φ	
H - Codebtors				\$,	S
I - Current Income of Individual Debtor(s)					\$ 3,40
J - Current Expenditures of Individual Debtors(s)					\$ 3,965
Т	OTAL		\$516.700.	\$'192,939,54	

B 6 Summary (Official Form 6 - Summary) (12/14)

UNITED STATES BANKRUPTCY COURT

Eastern District of Virginia

In re _	ACHI	TRAZABAL	- ,	Case No. 15-13212
		Debtor		Chapter

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	s φ
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ >
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 🖒
Student Loan Obligations (from Schedule F)	s \$
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$
TOTAL	s ()

State the following:

Average Income (from Schedule I, Line 12)	s 3110
Average Expenses (from Schedule J, Line 22)	s 3,965
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$ (S) (O)

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$
Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 5	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$
4. Total from Schedule F	* * * * * * * * * * * * * * * * * * * *	\$ \(\phi\)
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		s 🗘

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 3 of 25

B6A (Official Form 6A) (12/07)

In re _	AUA	IRAZABAL	
	D	ebtor	

Case No. 15-13212 (If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
6278 TALLAGERO WAM MI YCHIDRIF JE 7235	OMPEE	++	500,000	4-0,000 _

Total ► 500,000 (Report also on Summary of Schedules.)

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 4 of 25

B 6B (Official Form 6B) (12/07)

Inre ANA	IRAZABAL ,	Case No \ 5 - 13212
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

		· · · · · · · · · · · · · · · · · · ·		
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand.			Ĩ	60
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		SUNTRUST BLANK.		50. <u>-</u>
Security deposits with public utilities, telephone companies, landlords, and others.	L			
Household goods and furnishings, including audio, video, and computer equipment.		COMPOTER. TVS.		400
5 Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		an's force or Octor		ోంల
6. Wearing apparel.	ļ	CLOTHES		E00
7. Furs and jewelry.		SLOTHES JEWELRY		
8. Firearms and sports, photographic, and other hobby equipment.	L/			700
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	·/			
10. Annuities. Itemize and name each issuer	V			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s).				

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 5 of 25

B 6B (Official Form 6B) (12/07) -- Cont.

In re	ANA_	IRAZABAL
	Daht	~

Case No. 5-13212 (If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	/			
Stock and interests in incorporated and unincorporated businesses. Itemize.	/			
14. Interests in partnerships or joint ventures. Itemize.				
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	V			
16. Accounts receivable.	\checkmark			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	V			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.				
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	V			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	\checkmark			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	$\sqrt{}$			

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 6 of 25

B 6B (Official Form 6B) (12/07) -- Cont.

In re	<u> ANA</u>	1RAZABAL	,
	Debtor	r	

Case No. 15-132-12 (If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	V	-		
23. Licenses, franchises, and other general intangibles. Give particulars.	./			
24 Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.				
25. Automobiles, trucks, trailers, and other vehicles and accessories.		FAMILY CAR		15,000 -
26. Boats, motors, and accessories.				
27. Aircraft and accessories.				
28 Office equipment, furnishings, and supplies.				
29. Machinery, fixtures, equipment, and supplies used in business.	/			
30. Inventory.	<u></u>			
B1. Animals.	V			
32. Crops - growing or harvested. Give particulars,				
33. Farming equipment and implements.	\ \			
34. Farm supplies, chemicals, and feed.	$ ec{ee} $			
35. Other personal property of any kind not already listed. Itemize.	$ \checkmark $			

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 7 of 25

B6C (Official Form 6C) (04/13)

In re	ANA	+ IRAZABA	Ψ,
		Dehtor	

Case No. 15-13212 (If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT_

Debtor claims the exemptions to which debtor is entitled under:	Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675.*
7 11 11 C C C 522/LV3	

 	C.D.C.	3	0(0/(-)
11	U.S.C.	§	522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
110175			

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 8 of 25

B 6D (Official Form 6D) (12/07)				
In re_	ANA	12AZABRU	, Case No.	15-13212
		Debtor	_	(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

					•			
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. OOI 023976		· <u>·</u>	SEPTEMBER 2005					
THE FIT ANCE THE ENTHOUSE SUITE 400	V	H	MORTGAGE					
4005mm TX 77042								ļ
			VALUE \$ 500,000				436.720	×
ACCOUNT NO. 37463599923	256		OCTOBER 2006					
the carp services			CCLIEN					
7.0. Box 15026			- 400					
WILHINGTON DE 19850			VALUE\$ 27,017.44				27,017.44	×
ACCOUNT NO. XXX 5935			OCTOBER 1995					
DI SOCHEYE			_					
20.60× 30943			cecient]
SALTLAKE I'M UT 84130								
			VALUE\$ 7202-10				7,202.10	×
continuation sheets attached			Subtotal ► (Total of this page)				\$ 470,939.54	\$
			Total ▶				\$	\$
			(Use only on last page)				(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Certain Liabilities and Relate

Data.)

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 9 of 25

B 6D (Official Form 6D) (12/07) - Cont.

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In re	ANA	1RAZABAL	
		Debtor	_

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0000505	18084		JUNE 2014					
7,0, BOX 17948								
GREENVIllE NC29606			WALLES TO DE TO				22. ∘ ω	×
ACCOUNT NO.			VALUE \$ 22,000					
ACCOUNT NO.			VALUE \$			··		
			VALUE \$					
ACCOUNT NO.					*	···	, , , , , , , , , , , , , , , , , , ,	-
			VALUE \$			·		
ACCOUNT NO.								
Sheet no. of continu			VALUE \$					
Sheet no. of continue sheets attached to Schedule of Creditors Holding Secured Claims	atiOti		Subtotal (s)► (Total(s) of this page)				\$ 22,000	\$
			Total(s) ► (Use only on last page)				\$ 492,939.54 (Report also on	\$ (If applicable,
							Summary of Schedules.)	report also on Statistical Summary of Certain

Liabilities and Related Data.) Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 10 of 25

B6E (Official Form 6E) (04/13)

In re ANA 2A2ABLL.

Debtor

Case No. 15-13212 (if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 11 of 25

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 12 of 25

B6E (O	official Form 6E) (04	1/13) - Cont.			
In re	A-NA	1RAZABOL	Case No.	15-13212	
-		Debtor		(if known)	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

							ype of Priority to		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFF, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Account No.									
Account No.									
Account No.									
Sheet noof continuation sheets attach Creditors Holding Priority Claims	ed to Sci	hedule of	of Subtotals (Totals of this page) Total (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)			ıge) al≯	s		
			(Use only on last page of t Schedule E. If applicable, the Statistical Summary of Liabilities and Related Dat	report Certair	also on			\$	\$

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 13 of 25

B 6F (Official Form 6F) (12/07) Case No. 15-13212 (if known) AuA and

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data...

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the ☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY CREDITOR'S NAME, DATE CLAIM WAS AMOUNT OF JNLIQUIDATED CONTINGENT CODEBTOR MAILING ADDRESS INCURRED AND CLAIM CONSIDERATION FOR INCLUDING ZIP CODE, AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NO ACCOUNT NO ACCOUNT NO ACCOUNT NO \$ Subtotal continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 14 of 25

B 6F (Official Form 6F) (12/07) - Cont.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.	-						9
ACCOUNT NO.							<u> </u>
ACCOUNT NO.			····				
Sheet no. of continuation si to Schedule of Creditors Holding Unsecure Nonpriority Claims	neets atta	ched			Sub	total➤	s
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.) Total➤ \$ Characteristic Summary of Certain Liabilities and Related Data.						s Ф	

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 15 of 25

B 6G (Offi	icial Form 6G) (12	(07)		
ln re	AAA	12424BU,	Case No	15-13212
	Debte	or		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 16 of 25

B 6H (Official Form 6H) (12/07)

In re _	ANA	12AZABAL	,
		Debtor	

Case No. 15-13212 (if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 17 of 25

Fill in this in	formation to identify	your case:					
	A		10 A D A O A I				
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States I	Bankruptcy Court for the:	EASTERN	District of \(\frac{\frac{1}{2} F}{2} \)	`			
Case number	15-1	3212			Check if	this is:	
(If known)					F	nended filing	
						pplement showing poster 13 income as of the	
Official F	orm B 6I					DD/YYYY	s lollowing date.
		ır Income					12/13
supplying cor If you are sepa separate shee	rect information. If your spourated and your spou	ossible. If two married pou are married and not use is not filing with you top of any additional p	filing jointly, and you, do not include inf	our spe format	ouse is living with tion about your sp	you, include informatio ouse. If more space is r	n about your spouse. needed, attach a
1. Fill in your informatio			Debtor 1			Debtor 2 or non-f	iling spouse
attach a se	more than one job, parate page with about additional	Employment status	Employed Not employ	ed		Employed Not employed	
Include par self-employ	t-time, seasonal, or ed work.	Occupation	ZEALTOE	·			
	may Include student ker, if it applies.	Occupation		<u> </u>	ISTER RET	I Thes	
		Employer's name	1 24QJ		12.50 504		
		Employer's address	7010 LIT Number Street	TE_	E-1) EL T	Number Street	
			•		: ·)f 2200	3 City	State ZIP Code
		How long employed the	here? 1046	S	HOIHS.		
Part 2:	ive Details About	Monthly Income					
spouse unle If you or you	ss you are separated ir non-filing spouse ha	the date you file this for eve more than one emplo ttach a separate sheet to	yer, combine the info	-		·	_
					For Debtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (calculate what the month		2.	\$ 1,200	\$	
3. Estimate a	nd list monthly over	time pay.		3.	+\$	+ \$	
4. Calculate	gross income. Add lin	ne 2 + line 3.		4.	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$	

Official Form B 61 Schedule I: Your Income page 1

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 18 of 25

Fift in this information to	identify your case:					
4.10		IRAZABAL				
Debtor 1 First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	—			
	t for the: EASTERN	District of VF	7			
Case number	1-13212		1	Check if t	this is:	
(If known)				==	nended filing	
					plement showing posi er 13 income as of the	•
Official Form B 6	<u>81</u>			MM / Di	D/YYYY	_
Schedule I:	Your Income					12/13
supplying correct informati if you are separated and yo	te as possible. If two married ion. If you are married and not ur spouse is not filing with you. On the top of any additional appropriate the possible of the possible of the top of any additional appropriate the possible of the possible o	t filing jointly, and you. do not include in	our spouse formation a	is living with y bout your spo	you, include informations. use, if more space is n	n about your spouse. leeded, attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-fi	ling spouse
If you have more than one attach a separate page w information about addition employers.	ith E-playment status	Employed Not employ	red .		Employed Not employed	
Include part-time, season self-employed work.	al, or Occupation	Hippy H	<u>ω</u> 3με <u>υ</u>	ISITOR		
Occupation may Include so or homemaker, if it applie	student		^.	0		
	Employer's name	TAICIAX	<u> (D)</u>	24d KOR	the Sthoors	> -
	Employer's address	2334 C Number Street	<u> </u>	<u> </u>	Number Street	
			RING State Z	VA 220	02.7 City	State ZIP Code
	How long employed t	here? 3 HC	NHS			
Part 2: Give Details	About Monthly Income					
Estimate monthly incomspouse unless you are se	e as of the date you file this for	orm. If you have noth	ing to repor	t for any line, w	rite \$0 in the space. Incl	ude your non-filing
If you or your non-filing sp	parateu. ouse have more than one emplo pace, attach a separate sheet to		ormation for	all employers for	or that person on the line	9 S
			F	or Debtor 1	For Debtor 2 or non-filing spouse	
	ges, salary, and commissions nonthly, calculate what the mont		2. <u>\$_</u>	<u> </u>	\$	
3. Estimate and list month	nly overtime pay.		3. + \$_	<u> </u>	+ \$	
4. Calculate gross income	e. Add line 2 + line 3.		4. \$_	2,250	\$	14

Official Form B 6I

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 19 of 25

First Name Middle Name Last Name			
		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	<u>\$ 2,250</u>	\$
List all payroll deductions:		_	
5a. Tax, Medicare, and Social Security deductions	5a.	\$ <u>340</u>	\$
5b. Mandatory contributions for retirement plans	5b.	\$.
5c. Voluntary contributions for retirement plans	5c.	\$ <u> </u>	s
5d. Required repayments of retirement fund loans	5d.	\$ <u> </u>	\$
5e. Insurance	5e.	\$	\$
5f. Domestic support obligations	5f.	\$ 2	
5g. Union dues	5g.	\$. \$
5h. Other deductions, Specify:	5h.	+\$ 5	. + \$
Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$ <u> </u>	\$
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$
List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	s_ \$	\$
8b. Interest and dividends	8b.	s Ø	\$
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <u></u>	\$
8d. Unemployment compensation	8d.	\$	\$
8e. Social Security	8e.	\$	\$
8f. Other government assistance that you regularly receive			
Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$	\$
Specify:	8f.	<i>a</i>	
8g. Pension or retirement income	8g.	s	\$
8h. Other monthly income. Specify:	8h.	+\$ <u> </u>	+\$
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	S LONG GO
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$\$	+ \$1,200 = \$3,110
State all other regular contributions to the expenses that you list in Scher	lule J		
nclude contributions from an unmarried partner, members of your household, other friends or relatives.	our d	ependents, your roo	ommates, and
Do not include any amounts already included in lines 2-10 or amounts that are	not av	ailable to pay expe	nses listed in Schedule J.
Specify:			11. + \$ 7
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of C			ted Data, if it applies 12. \$ 0,110
			Combined monthly income
Do you expect an increase or decrease within the year after you file this f	orm?		

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 20 of 25

Management and the second and the se

			<u> </u>			
Fill in this	information to identify	your case:	70000			
Debtor 1	First Name	Middle Name Last Na	ame (Check if this is:		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name Last Na	ame [An amended f	filing	
1 ' '	Bankruptcy Court for the:	•	strict of JA			-petition chapter 13
Case number	16-127	212		expenses as o		g date.
(If known)			Г	MM / DD / YYYY		2 because Debtor 2
Official	Form B 6J			maintains a se		
Sche	dule J: Yo	ur Expenses				12/13
information,		ossible. If two married people a ed, attach another sheet to this				
Part 1:	Describe Your Hou	usehold				
1. Is this a jo	int case?					
<u> </u>	o to line 2.					
Yes. Do	oes Debtor 2 live in a :	separate household?				
<u>ہے</u>	JNo Type Dobtor 2 must fil	le a separate Schedule J.				
<u>_</u>	7	e a separate scriedule J.				
-	ve dependents? Debtor 1 and	No Yes. Fill out this information		ship to	Dependent's age	Does dependent live with you?
	e the dependents'	each dependent		2	<u> </u>	□ No □ Yes
names.			DAUGHTER	<u>e</u>	5_	No Yes
			DAUGHTE	<u>c</u>	3_	No Yes
						□ No
						Yes
						☐ No
		en e				Yes
expenses	penses include of people other than nd your dependents?	No Yes				
Part 2: E	stimate Your Ongo	ing Monthly Expenses				
		bankruptcy filing date unless	ou are using this form a	s a supplement in	a Chanter 13 c	ase to report
	of a date after the bar	nkruptcy is filed. If this is a supp	_			
• •		n-cash government assistance i	If you know the value			
of such assis	tance and have include	ded it on Schedule I: Your Incor	me (Official Form B 6I.)		Your expe	nses
	or home ownership of the ground or lot.	expenses for your residence. In	clude first mortgage payme	ents and 4.	s 1,80)O
If not incl	uded in line 4:					
4a. Real	estate taxes			4a.	\$	
4b. Prope	erty, homeowner's, or re	enter's insurance		4b.	\$	
4c. Home	e maintenance, repair,	and upkeep expenses		4c.	\$	
4d. Home	eowner's association or	condominium dues		4d.	s 45	

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 21 of 25

1RAZA

15-13212

Case number (if known)

Your expenses 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: Electricity, heat, natural gas 6a 6b. Water, sewer, garbage collection 6b Telephone, cell phone, Internet, satellite, and cable services 6c. 6c. Other, Specify: _ 6d. 7. Food and housekeeping supplies 8. Childcare and children's education costs 8 100 Clothing, laundry, and dry cleaning 9. Personal care products and services 10. Medical and dental expenses 11. Transportation. Include gas, maintenance, bus or train fare. 12 Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a 15b. Health insurance 15b 15c. Vehicle insurance 15c. 15d. Other insurance. Specify:___ 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. PROPERH TAXES - CAR 16 17. Installment or lease payments: 489 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b 17c. Other. Specify:_ 17c 17d. Other. Specify:_ Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I). 19. Other payments you make to support others who do not live with you. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a 20a. Mortgages on other property 20b. Real estate taxes 20b 20c. Property, homeowner's, or renter's insurance 20c 20d. Maintenance, repair, and upkeep expenses 20d 20e. Homeowner's association or condominium dues 20e

Debtor 1

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 22 of 25

Debtor 1 AD First Nam	Middle Name	LAZABAL Last Name	Case number (# known)	15-	13212	
21. Other. Specify:			21	. +\$		_
•	xpenses. Add lines 4 monthly expenses.	through 21.	22	\$	3.965	
23b. Copy your construct your constr	2 (your combined mo	from your monthly income.	23a. 23b. 23c.		3,965 -855	
For example, do y mortgage paymer	ou expect to finish pa	se in your expenses within the year sying for your car loan within the year tase because of a modification to the	or do you expect your			

· ANTICIPATE AN INCREASE IN HI RETK ESTATE

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 23 of 25

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re ANA IRAZABAC

Case No. 15-13212 (if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

		99	
I declare under penalty of perjury that I have read the foregoing st my knowledge, information, and belief.	ummary and schedules, consisting	of sheets, and	that they are true and correct to the best o
9-28-15		\bigwedge	m -
Date 120-15	Signature:		Debtor
Date	Signature:		2000
Date	Signature.	(Joint Def	otor, if any)
	[If joint case, bo	th spouses must sign.]	
DECLARATION AND SIGNATURE OF NON-	ATTORNEY BANKRUPTCY PET		
I declare under penalty of perjury that: (1) I am a bankruptcy petition protected by the debtor with a copy of this document and the notices and information repromulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for senamount before preparing any document for filing for a debtor or accepting	equired under 11 U.S.C. §§ 110(b), 1 vices chargeable by bankruptcy petiti	10(h) and 342(b); and, on preparers, I have gi	(3) if rules or guidelines have been
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)		
If the bankruptcy petition preparer is not an individual, state the name, title who signs this document.	e (if any), address, and social securit	y number of the officer	, principal, responsible person, or partner
who signs and accument.			
Address			
X Signature of Bankruptcy Petition Preparer			
Signature of Bankruptcy Petition Preparer	Date		
Names and Social Security numbers of all other individuals who prepared of	or assisted in preparing this documen	t, unless the bankrupto	y petition preparer is not an individual:
If more than one person prepared this document, attach additional signed :	sheets conforming to the appropriate	Official Form for eac	n person.
A bankrupicy pelition preparer's failure to comply with the provisions of title 11 to 18 U.S.C. § 156.	and the Federal Rules of Bankruptcy Pro		,
DECLARATION UNDER PENALTY OF PE	RJURY ON BEHALF OF A	CORPORATION	OR PARTNERSHIP
I, the	ration or partnership] named as del	btor in this case, decl	are under penalty of perjury that I have
Date			
	Signature:		
	[Print or type n	ame of individual sig	ning on behalf of debtor.]
An individual signing on behalf of a partnership or corporation must	indicate position or relationship to	debtor.]	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 24 of 25

Fill in this information to identify your case:	Check one box	only as directed in this form and in						
Debtor 1 ANA 12AZABAL First Name Middle Name Last Name	,							
Debtor 2	1. There is no	presumption of abuse.						
Spouse, if filing) First Name District of District of								
Case number15 - 13212		Test does not apply now because of						
(If known)		litary service but it could apply later.						
	☐ Check if this	is an amended filing						
OFFICIAL FORM B 22A1								
Chapter 7 Statement of Your Current Month	ly Income	12/14						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with this form.								
Part 1: Calculate Your Current Monthly Income		<u> </u>						
1. What is your marital and filing status? Check one only.		ST. Harris						
Not married. Fill out Column A, lines 2-11.	_	~ ~						
Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-1	1.							
Married and your spouse is NOT filing with you. You and your spouse are:								
Living in the same household and are not legally separated. Fill out both Col		~						
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).								
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.								
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse						
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<u>50116</u>	\$						
Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u> </u>	\$						
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>3965</u>	\$						
5. Net income from operating a business, profession, or farm								
Gross receipts (before all deductions) \$								
Ordinary and necessary operating expenses - \$								
Net monthly income from a business, profession, or farm \$ Copy here→	\$ <u> </u>	\$						
6. Net income from rental and other real property Gross receipts (before all deductions) \$								
Ordinary and necessary operating expenses \$								
Net monthly income from rental or other real property \$ Copy here	\$Ø	\$						
7. Interest, dividends, and royalties	\$	\$						

Case 15-13212-RGM Doc 17 Filed 09/28/15 Entered 09/30/15 12:12:18 Desc Main Document Page 25 of 25

Debtor	1	ANA First Name	LAZABAL Last Name	·	Case number (if known)_	15-1321	2	
The state of the s					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
8. U	nemplo	yment comp	ensation		s 🗸	\$		
			nt if you contend that the amount r ity Act. Instead, list it here:		·	· · · · · · · · · · · · · · · · · · ·		
	For yo	ouu		\$				
[: -	Foryo	our spouse		\$				
		or retirement nder the Socia	: income. Do not include any amo il Security Act.	unt received that was a	\$_ <i>Ø</i>	\$		
a	o not in s a victi	iclude any ben m of a war crin	sources not listed above. Speci efits received under the Social Se ne, a crime against humanity, or ir list other sources on a separate p	curity Act or payments re nternational or domestic	eceived			
	10a	<u> </u>			\$ <u> </u>	\$		
	10b				\$ <u> </u>	\$		
	10c. Tot	al amounts fro	m separate pages, if any.		+\$	+ \$		
			urrent monthly income. Add line otal for Column A to the total for C		\$ 0110	+ <u> </u>	Total current monthly	
Part	2: [Determine W	hether the Means Test App	lies to You			income	
12. C	alculate	e your current	monthly income for the year. F	ollow these steps:		_		
1:	2a. Co	py your total c	urrent monthly income from line 1	1	Сору	line 11 here → 12a.	\$ 3110	
	Mı	altiply by 12 (th	e number of months in a year).			•	x 12	
1:	2b. Th	e result is your	annual income for this part of the	form.		12b. [\$ <u>37,320</u>	
13. C	alculat	e the median	family income that applies to yo	u. Follow these steps:				
F	ill in the	state in which	you live.	VIRGINIA				
F	ill in the	number of peo	ople in your household.	Ч		-		
T	o find a	list of applicab	income for your state and size of the median income amounts, go or n. This list may also be available a	nline using the link specifi	ied in the separate	13.	<u>\$ 93,349</u>	
		the lines com						
	(Go to Part 3.	s than or equal to line 13. On the t					
14			re than line 13. On the top of page nd fill out Form 22A– <i>2.</i>	e 1, check box 2, <i>The pre</i>	sumption of abuse is deter	mined by Form 22A	2.	
Part	3:	Sign Below						
	В	y signing here	, I declare under penalty of perjury	that the information on t	his statement and in any a	ttachments is true an	d correct.	
	3	ĸ	10 h	,	¢			
		Signature of D	Pebtor 1	·····	Signature of Debtor 2			
		Date 09-			·			
		Date MM / DO			Date MM / DD / YYYY	_		
	If	you checked li	ine 14a, do NOT fill out or file Forr	m 22A-2.				
If you checked line 14b, fill out Form 22A–2 and file it with this form.								